

ARTbox Derby Contestant and Payment Information

Driver's name: _____ Age: _____

Teammate's name: _____ Age: _____

Car or team name: _____

This can come to us at later date

Name of adult in charge: _____ Relationship: _____

The Primary contact must be an adult (18 or over) per team of contestants under the age of 16.

Street address: _____

City/State/Zip: _____

Home Phone # _____ Mobile # _____

Email address: _____

This email will be our primary means of contact.

Entry fee is \$20 per team/car*

Enclosed is check/cash for \$ _____ Please charge my Visa/MC/AMEX for \$ _____

Checks made payable to the Arts Council of Princeton

Name as it appears on the credit card: _____

Card no. _____ exp. Date: _____

Address: _____ Zip: _____

Signature: _____

**For financial assistance please contact Maria Evans mevans@artscouncilofprinceton.org*

Return both forms to: Arts Council of Princeton at the Paul Robeson Center for the Arts
102 Witherspoon Street, Princeton, NJ 08542 or Fax: (609) 921-0008
Attention: ARTbox Derby

Due date: **September 17, 2010**